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Extracted from the American Journal of the Medical Sciences for October, 1882.

EUCALYPTUS GLOBULUS IN GYNÆCOLOGICAL PRACTICE, TOGETHER WITH AN ACCOUNT OF SEVERAL CASES IN WHICH IT WAS USED.

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This drug is destined to play an important part in gynæcological therapeutics. It is only since 1865 that its therapeutic action has been tested, and, with the cloud of new remedies constantly before the attention of the profession, it has not received the full trial which it is sure to get eventually. (See an article upon the subject by Vogl in *Real-Encyclopädie der Gesammten Heilkunde.*)

It first excited investigation on account of the real or supposed action of the growing tree in countries where it is indigenous, as a dissipator of *malaria*. From Australia, its home, it has been transplanted to other countries, primarily on this account. Its transportation to the domain of experimental medicine was an easy and natural step. An oil was extracted from its large and beautiful leaves, fragrant and powerful. The physiological experimenters, chief among whom was Mosler, found that it was useful not only on account of its antiperiodic effects, but as an antiphlogistic, its function being to diminish the action of the heart, and the blood pressure. When applied to the mucous membrane of the mouth, it caused a sensation of heat, followed by that of dryness. On mucous membrane, in general, it was found to be stimulant, astringent, and antiseptic; hence a wide variety of uses was suggested, as in diphtheria, various lung troubles, gonorrhœa, and, in general, inflammations of the mucous membrane, of the bladder, vagina, and rectum. Mees affirmed that it held the highest place as an antiseptic (*loc. cit.*). Schultze says its oil is not only a powerful antiseptic, it also stimulates granulations. Its solution not being readily effected, he gives, as a formula for an emulsion: Ol. eucalypti, 3 parts; alcohol, 15 parts; water, 115 parts. (*Centr. für Gynäkologie*, No. 34, 1881.)

In May, 1881, at a meeting of the London Clinical Society a fatal case of carbolic acid poisoning was reported, following an operation done with antiseptic precautions. Mr. Lister was at the meeting, and admitted that the facts were undoubtedly as stated. He then announced that in Eucalyptus Globulus was found an antiseptic almost entirely free from danger,

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with an agreeable aromatic odour, and without many of the objections which pertain to carbolic acid.

We could not expect such an agent to be absolutely free from danger, for the laws governing the action of antiseptics are doubtless similar or nearly so in their application to low forms of animal life and to the cellular organization of the human being, which causes us to wonder that accidents from their use are so comparatively infrequent. The objections to preparations of Eucalyptus are their expense, their insolubility in water, and their volatility. The oil combines very well, said Mr. Lister, with resin and dammar gum. (*Lancet*, 1881, vol. i. 837.) The literature of the subject is very meagre, and I could find but one reference to its use in gynæcological practice. (De l'hydrate de chloral associé a la teinture d'eucalyptus dans la traitement du cancer de l'uterus—*Gaz. Obstetricale*, vol. v. 682.)

I was directed to use the drug by Dr. James B. Hunter as an anæsthetic in several severe cases of ovaritis in his service at the Woman's Hospital, during the winter of 1881–2, at which time I was serving there as house-surgeon. The results were very satisfactory, as I shall endeavour to show. The preparation used was a solution composed of equal parts of the fluid extract of eucalyptus and glycerine. Dr. Hunter told me that he sometimes used the unmixed and undiluted oil in his private practice upon gynæcological patients, its effects being very satisfactory. Dr. Frank P. Foster has had a preparation made, composed of the oil of eucalyptus and iodoform, with the happy result of entirely destroying the disgusting odour of the latter drug. The combination will undoubtedly be a very efficient one. The cases upon which the observations were made were the following:—

Case I.—Mrs. M., aged 33, admitted to the Woman's Hospital September 22, 1881. She has been married nine years, and was never pregnant. She has been complaining for four years, especially with pains in the back, extending to the sides and down the thighs. Menstruation began at thirteen, was scanty in quantity until two years since, when it became more profuse. It usually lasts four days, and is accompanied by bearing-down pains in the abdomen and right thigh. For two years she has had attacks of pelvic inflammation during the months of January and February. Micturition is painful and frequent, and sometimes bloody. Walking causes pain in the right side. The bowels are constipated and movements are accompanied with pain in the rectum and womb. A diagnosis of retroversion, prolapse of the left ovary, and cellulitis was made, and during the next five months in addition to the usual vaginal douches of hot water, twice daily, numerous pessaries were tried and removed after a short time, on account of the irritation and pain which were caused by them. When the uterus was not sustained by a pessary, cotton pads soaked in glycerine were used for the purpose. At times the patient seemed much benefited and could go about very comfortably; then the old condition would recur, and as much pain and discomfort be present as before.

About the 1st of March the eucalyptus preparation was tried, about half an ounce being distributed upon several pledgets of cotton with which the vagina was lightly tamponed. This was repeated every day or nearly every day, for several weeks, with great relief from the local and reflex pain. She became more comfortable than she had been with the applications previously in use.

Case II.—Mrs. R., aged 31, admitted Nov. 5. She was married eleven years ago, has had one child, and her labour was very severe. It was three days in duration, and the child was instrumentally delivered. Since that time she has been sick continually. Menstruation began at seventeen, lasts from three to four days, is normal as to quantity, and is preceded by pains in the sides, abdomen, and back before the flow appears. This pain continues during the period, and does not cease until several days after that has ended, being of a very severe character.

Diagnosis—Retroversion—Sub-involution of the uterus—Prolapse of the left ovary. Very much the same treatment was adopted as in Case I., with very little benefit, until the eucalyptus was tried. This had a very satisfactory effect in subduing the pain, and if, for any cause, the daily application were omitted, the pain and discomfort returned.

Case III.—Mrs. F., readmitted Nov. 7, aged 29. She was in the hospital a year ago, and was operated upon for laceration of the cervix. The operation did not bring the hoped-for recovery. The uterus remained large and exquisitely tender, and there were severe pains in the back and left side, exaggerated at the menstrual epoch. Menstruation takes place every three weeks, and is scanty as to quantity. She also suffers from pain and a burning sensation during micturition. Examination showed the womb to be retroverted, firmly fixed, and much enlarged. The left ovary was enlarged, prolapsed, and excessively tender. For treatment, she received the hot-water vaginal douches twice daily, iodine was applied to the vaginal vault, and the uterus was supported by a cotton tampon. In three weeks the uterus was quite movable, but the patient still complained of almost constant pain. This treatment was continued for the following three months, resulting in bringing the uterus back to its position, reducing its size, and relieving the pain to a certain extent; then the eucalyptus mixture was tried, applied daily, and its anæsthetic effect was very marked. The cotton pledgets were applied while the patient was in the knee-chest position, and pressure was brought to bear directly upon the prolapsed ovary.

Case IV.—Mrs. S., aged 30, admitted January 20. She has been married fourteen years, and has had one child, which was born twelve years since. She has been complaining since her confinement with pain in the hypogastrium, back, and thighs. Menstruation began at twelve, and was regular and normal until the birth of her child. At the present time the flow is scanty and of offensive odour, accompanied with pain during the first day. Walking is painful, and so are movements from the bowels. The uterus is retroflexed, and both ovaries are prolapsed, the left one more than the right. Improvement was marked at the end of a month, under the same treatment as that received by the other cases detailed. The use of the eucalyptus was begun when it was begun with the others. The effect was not so positive, probably because the woman did not suffer such acute pain as Cases I., II., and III.

Case V.—Mrs. G., aged 36, admitted February 16. She has been married eleven years, has had two children, the last of which came five years since, and was delivered with forceps. Her menstruation has been

regular. She has pain in the back and hypogastrium, also nausea and vomiting for a week before the flow comes. The flow lasts two days, and is scanty as to quantity. She is obliged to pass water frequently. Walking causes pain in the hypogastrium. The bowels are constipated. A laceration of the cervix was closed two years since.

Diagnosis—Retroflexion and prolapse of the left ovary. The case was treated precisely like the others, and with the same satisfactory relief to the pain when the eucalyptus was used.

In none of these cases which have been described, is it claimed that a cure has been effected by the use of the substance under consideration. They were selected because they were typical cases of a disease in which pain is a constant and harassing feature. This must first be met, and then, in conjunction, the mechanical and constitutional means of treatment. Every substance which lessens the amount of pain in the universe, and which may be safely used under proper restriction, is a boon to humanity. The number of such substances used in gynæcological practice is quite small, and I consider eucalyptus a valuable addition. Besides its anæsthetic effects, it is, as we know, antiseptic and antiperiodic, and hence it will be of use in that large class of cases where foul-smelling discharges exist, and also as an adjuvant in the treatment of malaria. The absorptive function of the vaginal mucous membrane has been comparatively little employed in constitutional treatment, and this is a field which yet remains to be worked up. A daily application of this substance must have more than a local influence. It will usually be difficult to give treatment so frequently, excepting in hospital practice. Much better results would follow could a continuous effect of this, as well as of some other means of treatment be obtained, but the expense and the annoyance, and in many cases the dread of pain prevent. The very fair degree of success obtained in treating the cases described in this paper, leads me to believe, that in less severe cases we can feel almost positive that we can give great relief, indeed, my experience in private practice confirms that belief. In a quite different class of cases eucalyptus will also be serviceable. I refer to wounds of the breast after the removal of tumours. With the increasing favor of the open method of treating such wounds, especially when the growth removed has been of a cancerous nature, its stimulant and antiseptic properties will prove very acceptable.

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